FIRST REGULAR SESSION

SENATE BILL NO. 449

100TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR SATER.

Read 1st time February 26, 2019, and ordered printed.

2253S.01I

ADRIANE D. CROUSE, Secretary.

AN ACT

To amend chapter 376, RSMo, by adding thereto one new section relating to out-ofpocket costs for prescription drug benefits.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Chapter 376, RSMo, is amended by adding thereto one new 2 section, to be known as section 376.448, to read as follows:

- 376.448. 1. (1) As used in this section, unless the context clearly indicates otherwise, terms shall have the same meanings as ascribed to them in section 376.1350.
- (2) As used in this section, the term "flat-fee drug copayment plan" shall mean a health benefit plan that utilizes a pre-deductible flat-fee copayment structure for the entire drug benefit at all tiers, and does not require a deductible or any coinsurance amount with regard to drug benefits.
- 2. (1) Notwithstanding any provision of law to the contrary, no later than January 1, 2020, each health carrier shall ensure that no less than twenty-five percent of health benefit plans it offers within each service area and at each metal level as defined in 42 U.S.C. 18022, if applicable, are flat-fee drug copayment plans. If a health carrier offers fewer than four health benefit plans within a service area or in a service area and metal level, the carrier shall ensure that at least one plan offered is a flat-fee drug copayment plan.
- 17 (2) The copayment structure for flat-fee drug copayment plans 18 shall be reasonably graduated and proportionately related in all tier 19 levels such that the copayment structure as a whole does not 20 discriminate against or discourage the enrollment of individuals with 21 significant health care needs.

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- (3) Health carriers shall clearly and appropriately name all flatfee drug copayment plans to aid consumers and sponsors in selecting a health benefit plan.
- 25 (4) Carriers shall market flat-fee drug copayment plans in the 26 same manner as other plans. With respect to group plans, carriers shall 27 ensure each group or plan sponsor has the option to purchase a flat-fee 28 drug copayment plan.
- 3. The department of insurance, financial institutions, and professional registration may promulgate rules as necessary to implement the provisions of this section. Any rule or portion of a rule, 31 as that term is defined in section 536.010 that is created under the 32authority delegated in this section shall become effective only if it 33 complies with and is subject to all of the provisions of chapter 536, and, 3435 if applicable, section 536.028. This section and chapter 536 are 36 nonseverable and if any of the powers vested with the general assembly 37pursuant to chapter 536, to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or 39 adopted after August 28, 2019, shall be invalid and void.

